

Pierce County Jail Site Specific

POLICY: Procedure in the Event of Sexual Assault

NO. J-B-05A

Date of Origin: 02/01/2014

Revised: New

REFERENCE: NCCHC J-B-05

ACA 4-ALDF-4D-22

Form: CCS-SP06 Incident Report Memo & Form

POLICY:

Prompt and appropriate health intervention will take place in the event of a sexual assault in an effort to minimize medical and psychological trauma.

PROCEDURE:

1. Reporting

- a. This Policy and Procedure directs employees, regardless of title, to have a duty to report any sexual contact, sexual abuse, sexual threat or staff voyeurism, or information regarding inappropriate relationships between an employee and an inmate. Such duty to report will include any allegations, knowledge or reasonable belief regarding such conduct.
- Allegations are to be reported regardless of whether supported by medical evidence.
- Any employee who fails to report such information may be subject to disciplinary action.
- d. An employee who receives an allegation or information that an inmate is the victim of an incident of sexual assault, sexual threats or staff voyeurism must be aware of the sensitive nature of the situation. The inmate must be treated with due consideration for the effects of sexual abuse.
- e. No reprisal of any kind will be taken against an inmate or employee for good faith reporting of such an incident.

Intervention

- a. Whenever an employee knows or suspects, or receives an allegation from any source regarding inmate sexual assault, the employee will immediately notify the Health Service Administrator.
- b. An Incident Report Form is completed and pertinent information is obtained, noting who, what, where, when and how, name of reporting person, inmates involved (if applicable) and the sexual assault allegedly committed.
- The inmate is immediately escorted to medical for a preliminary evaluation and treatment of any visible injuries.
- d. This evaluation is to be done without disturbing evidence and afford as much privacy as possible.
- e. Victims of assault will be referred to the Avera McKennan emergency department for an assessment and to determine whether a forensic evaluation and rape kit is required. Call and ask for the Resource Nurse to let them know they may need to have

a Sexual Assaultive Investigation Nurse (SAIN) available. If you need to get a hold of the primary contact for the SAIN department you call contact at 605-3

- f. No statements will be taken from inmates or employees unless otherwise directed by the facility's administrator or a designee.
- g. With signed consent, medical information may be obtained from the alleged perpetrator so that appropriate medical intervention can be initiated for the victim.
- If needed, a treatment plan will be developed regarding any additional medical follow-up required

3. Mental Health

- a. After any emergency treatment is provided, health care staff will notify mental health staff of event. An immediate telephone referral, including after hours, is the preferred referral format in case of an assault.
- If after-hours mental health issues are handled by health care staff at the facility, the evaluating health care staff member will assess need for immediate crisis based interventions. The psychiatrist may be contacted for consultation if such is deemed necessary.
- Mental health staff will assess need for crisis intervention, and provide those services as necessary.
 - Mental health staff will offer on-going follow-up services. If the inmate refuses such services, the inmate will be informed that a mental health staff member will follow-up in fourteen (14) days to determine if the inmate is functioning adequately and offer any follow-up services. All encounters will be documented in the inmate's health record, including any refusals of follow-up services.
- c. If the facility identifies an alleged perpetrator of the assault (through means such as placement in a Segregation Unit, issuing a disciplinary report, or filing of criminal charges), a mental health staff member will follow-up with this individual and assess adjustment to his or her current situation. If placed in Segregation, mental health staff will continue to monitor adjustment issues at least weekly via the Segregation rounds process. The professional assigned to this duty shall not be the same person assigned to any on-going follow-up with the victim of the assault

4. Training / Orientation

- a. CCS employees will receive in-service training and instruction that relates to the prevention, detection, response and investigation of staff-on-inmate and inmate-oninmate sexual abuse.
- b. Training will include instructions on being alert to signs of potential situations in which sexual abuse might occur, including the fact that sexual abuse can happen anywhere, inside or outside facilities, including housing areas, holding cells, and administrative food service or program areas.
- Training will emphasize that practices such as leaving sliders or doors open can be prime contributing factors to a sexual incident, and the importance of staying alert.
- Training will also include instructions on recognizing the physical, behavioral and emotional signs of sexual victimization.
- Training will emphasize the security consequences of any inappropriate relationships with inmates, including sexual conduct.
- f. Information on sexual assault is located in the inmate handbook.